510(k) Summary ORATEC® Electrosurgical Probes

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.92.

The assigned 510(k) number is: KOO 691

Submitter:

ORATEC® Interventions, Inc.

3700 Haven Court Menlo Park, CA 94025

Establishment Registration # 2953127

Contact:

Jennifer Brennan

Regulatory Affairs Associate_ Telephone: (650) 369-9904 Fax: (650) 369-9902

Date Prepared:

February 25, 2000

Device Name

Classification Name: Common/Usual Name: Electrosurgical device Electrosurgical accessory

Proprietary Name:

ORATEC® Vulcan™ Electrosurgical Probes:

Vulcan Ligament ChiselTM
Vulcan Micro Ligament ChiselTM
Vulcan EflexTM Ligament ChiselTM

Vulcan Ablator™

Predicate Devices:

ORATEC Electrosurgical Probes Mitek Electrosurgical Probes Linvatec Electrosurgical Probes ArthroCare Electrosurgical Probes

Device Description:

The devices described in this 510(k) are sterile, disposable devices intended for use with the ORATEC Vulcan ElectroThermal Arthroscopy System (EAS) RF Generator.

Technological Characteristics:

The ORATEC Vulcan Electrosurgical Probes are technologically the same as the predicate devices. All devices use high frequency electrosurgical current to achieve the intended clinical purpose.

Conclusion:

Based on the fundamental scientific technology characteristics, performance, and comparison to the predicate devices, the ORATEC Vulcan Electrosurgical Probes are substantially equivalent to the predicate devices: ORATEC, Mitek, Linvatec, and ArthroCare Electrosurgical Probes under the Federal, Food, Drug and Cosmetic Act. ORATEC Electrosurgical Probes are manufactured and distributed by ORATEC Interventions, Inc.

K 000691

Indications for Use:

The ORATEC Vulcan Electrosurgical Probes, in combination with ORATEC Vulcan ElectroThermal Arthroscopy System (EAS) Generator, is intended for general surgical use, including orthropaedic and arthroscopic applications of resection, ablation, excision of soft tissue, hemostasis of blood vessels and in coagulating soft tissues in joints including but not limited to the knee, shoulder, wrist, hip, etc. Arthroscopic surgery could include, for example, the following:

Examples of Arthroscopic Surgery	All Joints	Joint Specific		
		Knee	Shoulder	Wrist
Debridement	x			
Tendon	x			
Cartilage	x			
Fracture	¥			
Plica Removal	x			·
Resection	x			
Synovectomy	x			
Bursectomy	x			
Ablation	x			
Excision of Soft Tissue	x			
Scar Tissue	x			
Hemostasis of Blood Vessels	x	P		·····
Coagulating Soft Tissues	x			
Ligament	x			
Articular Cartilage	x			
Chondroplasty	x			
Meniscectomy		x		
Meniscal Cystectomy		x		
PCL/ACL Debridement		X		
Notchplasty		x		
Lateral Release		x		
Labral Tear		x		
Acromioplasty			x	V L
Rotator Cuff Debridement			x	
Subacromial Decompression			x	
CA Ligament Resection			x	
Capsular Release			x	
Triangular Fibrocartilage (TFC)				X

MAY - 4 2000

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Ms. Jennifer Brennan Regulatory Affairs Associate ORATEC Interventions, Inc. 3700 Haven Court Menlo Park, California 94025

K000691 Re:

Trade Name: Vulcan Electrosurgical Probes: Vulcan Ligament Chisels™ (913001,

straight; 913002, angled; 913003, curved; 913004, hook

Vulcan Micro Ligament Chisels™ (913004, angled; 913005, curved;

913004, hook)

Vulcan E-flex TM Ligament Chisel (913007, angled); and

Vulcan Ablator™ Probes (910001, 90°; 910002, 30°; 910003, 60°;

910007, 90° High Profile)

Regulatory Class: II Product Code: HRX, GEI Dated: February 25, 2000 Received: February 29, 2000

Dear Ms. Brennan:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirement, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4595. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

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Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

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Tendon	x				
Cartilage	x				
Fracture	X				
Plica Removal	X				
Resection	X				
Synovectomy	x		<u> </u>		
Bursectomy	X				
Ablation	х				
Excision of Soft Tissue	Х				
Scar Tissue	Х				
Hemostasis of Blood Vessels	x				
Coagulating Soft Tissues	X				
Ligament	X				
Articular Cartilage	х				
Chondroplasty	X				
Meniscectomy		X			
Meniscal Cystectomy		X			
PCL/ACL Debridement		X			
Notchplasty		X			
Lateral Release		X			
Labral Tear		X			
Acromioplasty			X		
Rotator Cuff Debridement			x		
Subacromial Decompression			X		
CA Ligament Resection			<u> </u>		
Capsular Release			X		
Triangular Fibrocartilage (TFC)				X	

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PAGE IF NEEDED	

Concurrence of CDRH, Office of Device Evaluation (ODE)

Division a General Restorative Devices

510(k) Number K000691

Prescription Use _____(Per 21 CFR 801.109)

OR

Over-The-Counter Use _____

(Optional Format 1-2-96)